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→ Approved for use through 10/31/2002 OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional application under 37 CFR 1.53(b))</i>		Attorney Docket No.: <i>First Named Inventor:</i> Title: Express Mail Label No.:	152-55CON <i>Daniel Leon, et al.</i> VETERINARY DELIVERY SYSTEMS AND METHODS OF DELIVERING EFFECTIVE AGENTS TO ANIMALS EV 171218635 US
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APPLICATION ELEMENTS <i>See MPEP chapter 6000 concerning design patent application contents</i>		ADDRESS TO: Assistant Commissioner for Patents <i>Box Patent Application Washington, DC 20231</i>	
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <i>(submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification <i>[Total Pages = 28]</i> (preferred arrangement set forth below, MPEP 1503.01) - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input type="checkbox"/> Drawings(s) (37 CFR 1.152) <i>[Total Sheets ____]</i></p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration <i>[Total Pages ____]</i> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) a. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> <i>Signed statement attached deleting inventor(s) named in the prior appl., see 37 CFR 1.63(d)(2) and 1.33(b)</i></p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on i. <input type="checkbox"/> CD-ROM or CD-R (2 copies or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>	
ACCOMPANYING APPLICATION PARTS			
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS) <i>PTO-1449</i> <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 <i>(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</i></p> <p>17. <input checked="" type="checkbox"/> Other: ... <i>PTO-2038 Form.....</i></p>			

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No. 09/344,693

Prior application information: Examiner: Neil S. Levy Group Art Unit: 1616

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label *(Insert Customer No. or Attach bar code label here)* or Correspondence address below

Name	Galgano & Burke				
Address	300 Rabro Drive, Suite 35				
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Name (Print/Type)	Daniel P. Burke	Registration No. (Attorney/Agent)	30,735
Signature		Date	December 5, 2003

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10/7/2003

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FEE TRANSMITTAL FOR FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision

Applicant claims small entity status.

See 37 CFR1.27

TOTAL AMOUNT OF PAYMENT (\$925.00)

Application Number:	Complete If Known
Filing Date:	To Be Assigned
First Named Inventor:	December 5, 2003
Examiner Name:	Daniel Leon, et a.
Group Art Unit:	Neil S. Levy
Attorney Docket No.:	1616
	152-55CON

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

 Deposit Account:

Deposit Account Number: 07-0130

Deposit Account Name: Galgano & Burke

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below
 Credit any overpayments
 Charge any additional fee(s) during the pendency of this application **except for issue fee**
 Charge fee(s) indicated below, except for filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	385.00
1002	340	2002	170	Design filing fee	_____
1003	530	2003	265	Plant filing fee	_____
1004	770	2004	385	Reissue filing fee	_____
1005	160	2005	80	Provisional filing fee	_____

SUBTOTAL (1) (\$385.00)

2. EXTRA CLAIMS FEES FOR UTILITY & REISSUE

Extra Claims	Fee from below	Fee Paid

Total Claims 80 - 20** = 60 x 9.00 = 540.00

Independent Claims 3 - 3** = 0 x 0.00 = 0.00

Multiple Dependent _____ = _____

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$540.00)

**or number previously paid, if greater;
For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing	_____
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	_____
1053	130	1053	130	Non-English specification	_____
1805	2520	1812	2520	For filing a request for ex parte reexamination	_____
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	_____
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	_____
1251	110	2251	55	Extension for reply within first month	_____
1252	420	2252	210	Extension for reply within second month	_____
1253	950	2253	475	Extension for reply within third month	_____
1254	1480	2254	740	Extension for reply within fourth month	_____
1255	2010	2255	1005	Extension for reply within fifth month	_____
1401	330	2401	165	Notice of Appeal	_____
1402	330	2402	165	Filing a brief in support of an appeal	_____
1403	290	2403	145	Request for oral hearing	_____
1451	1510	1451	1510	Petition to institute a public use proceeding	_____
1452	110	2452	55	Petition to revive - unavoidable	_____
1453	1330	2453	655	Petition to revive - unintentional	_____
1501	1330	2501	655	Utility issue fee (or reissue)	_____
1502	480	2502	240	Design issue fee	_____
1503	640	2503	320	Plant issue fee	_____
1460	130	1460	130	Petitions to the Commissioner	_____
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	_____
1806	180	1806	180	Submission of Information Disclosure Stmt	_____
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	_____
1809	770	2809	385	Filing a submission after final rejection 37 CFR §1.129(a))	_____
1810	770	2810	385	For each additional invention to be examined 37 CFR §1.129(b))	_____
1801	770	2801	385	Request for Continued Examination (RCE)	_____
1802	900	1802	900	Request for expedited examination of a design application	_____

Other fee (specify) _____

SUBTOTAL (3) (\$0.00)

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

COMPLETE (if applicable)

Name (Print/Type) Daniel P. Burke

Registration No. 30,735

Telephone: 631-582-6161

Signature 

Date: December 5, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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